## 8.B Medicare: Enrollment, Utilization, & Reimbursement

Table 8.B1.—Hospital Insurance and Supplementary Medical Insurance: Aged persons enrolled, served, and amount reimbursed, by type of coverage and service,  $1967-96^{\circ}$ 

			1			I		
Type of coverage and service	1967	1975	1980	1990	1994	1995	1996	Average annual rate change (percent), 1967-96
	Persons enrolled (in thousands)							
Hospital Insurance and/ or Supplementary Medical Insurance Hospital InsuranceSupplementary Medical Insurance	19,521 19,494 17,893	22,790 22,472 21,945	25,515 25,104 24,680	30,948 30,464 29,685	32,801 32,409 31,447	33,142 32,742 31,742	33,424 33,022 31,984	1.9 1.8 2.0
	Persons served (in thousands)							
Hospital Insurance and/ or Supplementary Medical Insurance	7,154 3,960 3,601 354 126 6,523 6,415 1,511	12,032 4,963 4,913 260 329 11,762 11,396 3,768 161	16,271 6,024 5,951 248 675 16,099 15,627 6,629 302	24,809 6,367 5,906 615 1,818 24,687 24,193 14,055 38	27,223 7,043 6,157 1,026 2,938 27,075 26,476 16,989 37	27,379 7,147 6,148 1,186 3,185 27,234 26,621 17,597 42	27,263 7,139 6,091 1,321 3,290 27,113 26,432 17,875 45	4.7 2.1 1.8 4.6 11.9 5.0 5.0 8.9 -3.3
	Persons served per 1,000 enrollees							
Hospital Insurance and/ or Supplementary Medical Insurance	367 203 185 18 7 365 359 77 7	528 221 219 12 15 536 519 172	638 240 237 10 27 652 633 269	802 209 94 21 60 832 815 474	830 217 190 32 91 861 842 540	826 218 188 36 97 858 839 554	816 216 185 40 100 848 826 559	2.8 .2 0 2.8 9.6 2.9 2.9 7.1 -6.5
	Amount reimbursed (in millions)							
Hospital Insurance and/ or Supplementary Medical Insurance	\$4,239 2,967 2,659 274 26 1,272 1,224 38 17	\$12,689 9,209 8,840 233 136 3,481 3,050 374 56	\$29,134 20,353 19,583 331 440 8,871 7,361 1,261 159	\$88,778 54,244 48,952 1,886 3,406 34,533 27,379 7,077 78	\$129,033 83,072 65,722 5,735 11,614 45,961 34,408 11,395 158	\$138,948 89,631 68,213 7,504 13,914 49,317 37,069 12,045 203	\$145,322 95,404 71,191 9,157 15,056 49,918 36,865 12,838 215	13.0 12.7 12.0 12.9 24.5 13.5 12.5 22.2 9.1
	Amount reimbursed per person served							
Hospital Insurance and/ or Supplementary Medical Insurance	\$592 749 738 774 204 195 191 25 145	\$1,055 1,855 1,799 896 413 296 268 99 347	\$1,791 3,379 3,291 1,336 652 545 471 190 526	\$3,578 8,520 8,289 3,068 1,874 1,399 1,132 503 2,033	\$4,740 11,794 10,675 5,590 3,953 1,698 1,300 671 4,277	\$5,075 12,542 11,096 6,325 4,368 1,811 1,392 684 4,862	\$5,330 13,363 11,688 6,931 4,577 1,841 1,395 718 4,815	7.9 10.4 10.0 7.9 11.3 8.0 7.1 12.3 12.8
	Amount reimbursed per enrollee							
Hospital Insurance and/ or Supplementary Medical Insurance	\$217 152 137 14 1 71 69 2	\$557 410 394 11 6 159 139 17 2	\$1,142 811 780 13 18 356 298 51	\$2,869 1,781 1,607 62 112 1,163 922 238 3	\$3,934 2,563 2,028 177 358 1,462 1,094 362 5	\$4,193 2,738 2,083 229 425 1,554 1,168 379	\$4,348 2,889 2,156 277 456 1,561 1,153 401	10.9 10.7 10.0 10.8 23.5 11.2 10.2 20.1 6.9

 $<sup>^{\</sup>rm 1}$  Data for persons enrolled as of July 1 are 100 and include HMO beneficiaries. Calendar year utilization for persons served and amounts reimbursed are inflated to represent 100 and exclude HMO services.

 $<sup>^2</sup>$  The Omnibus Reconciliation Act of 1980 (P.L. 96-499) eliminated the 100-visit limit on home health services and the 3-day prior hospitalization requirement.